

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000108159

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** MACK'S TOTAL LAWN SOLUTIONS, INC.

**Current Principal Place of Business:**

11314 HARLAN DR.  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

6542 ZORA ST  
JACKSONVILLE, FL 32219

**Current Mailing Address:**

11314 HARLAN DR.  
JACKSONVILLE, FL 32218

**New Mailing Address:**

PO BOX 26431  
JACKSONVILLE, FL 32226

**FEI Number:** 75-3255687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MACK, STEPHEN CHASE  
11309 VERA DRIVE  
JACKSONVILLE, FL 32218 US

**Name and Address of New Registered Agent:**

MACK, STEPHEN CHASE  
6542 ZORA ST  
JACKSONVILLE, FL 32219 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STEPHEN C MACK

02/18/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MACK, STEPHEN CHASE  
Address: 6542 ZORA ST  
City-St-Zip: JACKSONVILLE, FL 32219

Title: S  
Name: ADAMS, LINDSEY M  
Address: 6542 ZORA ST  
City-St-Zip: JACKSONVILLE, FL 32219

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN C MACK

OWNE

02/18/2010

Electronic Signature of Signing Officer or Director

Date